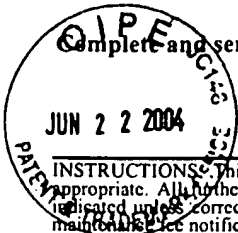


06-23-04

EV286048706US

## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail**

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06/03/2004

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<b>Luajuana LeGrande</b>	(Depositor's name)
<i>Luajuana LeGrande</i>	(Signature)
<b>June 21, 2004</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/029,779	12/18/2001	Rudiger Heidemann	MSB-7277	5688

TITLE OF INVENTION: DEVICE AND METHOD FOR SEED-TRAIN EXPANSION OF MAMMALIAN CELLS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/03/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LANKFORD JR, LEON B	1651	435-325000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 John W. Mahoney

2 \_\_\_\_\_

3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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**Bayer Pharmaceuticals Corporation****West Haven, Connecticut**

Please check the appropriate assignee category or categories (will not be printed on the patent);

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*John W. Mahoney* June 21, 2004

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